2007 FOR PROFIT CORPORATION ANNUAL REPORT

CORPORATION
REPORT

Security of State

DOCUMENT # P05000033378 1. Entity Name LOJETA GROUP OF FL, INC.			Secretary of Stat			
3501 N. OCEAN DRIVE	ailing Address 3501 N. OCEAN DRIVE IOLLYWOOD, FL 33019		 	E8181 81111 85111 88111 8811	H #8/82	
DO NOT WRITE IN THIS SPA		CE	03082007 4. FEI Numbe 20-246		CR2E034 (11	
6. Name and Address of Current Registered Agent TABATCHNICK, LON J 3501 N. OCEAN DRIVE HOLLYWOOD, FL 33019				NOT W		
8. The above named entity submits this statement for the the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00		od Agent signature required		th, in the State of Flo	orida. I am familiai	r with, and accept
10. OFFICERS AND DIRECT NAME TABATCHNICK, LON J STREET ADDRESS CITY-ST-ZIP HOLLYWOOD, FL 33019	CTORS					,
TITLE NAME STREET ADDRESS CITY-ST-ZIP				000000 -03/21/07	662449 80014-003	150.00
TITLE NAME STREET ADDRESS CITY-S1-ZIP		DO NOT WRITE IN THIS SPACE				
NAME SIREET ADDRESS CITY-SI-ZIP TITLE NAME STREET ADDRESS		-	***			
CITY-ST-ZIP IIILE NAME		-				

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes: and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

STREET ADDRESS CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/8/07

754-9226491

Daytime Phone :